Kentucky Transportation Cabinet Division of Motor Carriers PO Box 2007 Frankfort, Kentucky 40602 (502) 564-4540 TC 95-1 Rev. 4/2000

Kentucky Trucking Application

(Kentucky Intrastate Carriers of Household Goods and Passengers may not utilize this form)

PLEASE TYPE OR PRINT LEGIBLY

	Legal Name:				
	numberNO PO BC	OXES).		reet names and/or apartment	 t
	City:	State:	Zip Code:	County:	
	-		ng address if different	than above (include PO Box	ky residents only) k here). –
	City:	State:	Zip Code:		
				Contact Person:_	
	We must	have a phone numb	er where someone can	be reached if we have any a	questions
	we musi	nave a phone numb	er where someone can	to reaction if we have any c	•
		•	ership Corporati		•
	Business type: In	ndividual Partn	ership Corporati	on	•
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Section	Business type: In If a corporation, please In 2	ndividual Partn ase give state in whic	ership Corporation Corporation Corporated: de any of these number	on s that you may have.	•
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Kentuc	Business type: In If a corporation, please If a corporation, please If you are applying for the cky Highway Use (KY) Any carrier that has	ndividual Partn ase give state in whice ambers: Please provie for any of these numb U) #: a vehicle over 59,99	ch incorporated: de any of these number bers please write "app : 9 lbs. will need a KYU	on s that you may have. lied for" in the blank.	•
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Do you operate Private (hauling goods that belong to yourself) or For-Hire (Hauling goods that belong to someone else and receiving

payment to haul those goods)? **If For-Hire please complete** <u>Section 4</u>.

Section 4 Type of	Annligatio	un(s) (chool	z all that a	nnly).						
<u>1 ype oj 2</u>	<u> Аррисано</u>	<u>n(s)</u> (checl	k an mai a	ippiy):						
do not l	haul their insurance	own com from your	modities. insurance	arriers that are) This authority company.) to be operated u	will require a	\$25.00 filin				
	This auth	ority requi	res a \$10.	(Carriers that are 00 per vehicle fee to be operated un	e and the filing of	f Form-E inst		your insurance o	company.	
Please comple BMC 91or Please make	ete <i>Sectio</i> 91X. Thi ke all chec	on 6, ren	requires money	tration System-S proper fees, file that you have an lorders to Kentuc	e a copy of I ICC-MC Numbe cky State Treas	CC Authori r. All checks urer.	ty, a proces s <u>must</u> be ce	ess agent forn e rtified cashier s	m (BOC-3) s or money	and file a orders.
<u>*For-hire carriers</u> (502)223-6779 if	_				•		-		•	
(302)223-0779 tj	you are ba	isea in Ken	<u>шиску о</u>	r pieuse cuii youi	r base state for c	arriers ouisi	<u>ие Кениску</u>	<u> 10 jina 0ui yo</u>	ur ciussifici	mon.
Section 5 CARGO CLASSI	IFICATIO	NS (Please	Circle All	that Apply)						
A. GENERAL FRI B. HOUSEHOLD C. METAL; SHEE D. MOTOR VEHI E. DRIVEAWAY/ F. LOGS, POLES, G. BUILDING MA H. MOBILE HOM I. MACHINERY,	GOODS ETS, COILS ICLES TOWAWA BEAMS, I ATERIALS IES	AY LUMBER	H I I I I I	I. FRESH PRODUC K. LIQUIDS/GASE L. INTERMODAL M. PASSENGERS N. OILFIELD EQU D. LIVESTOCK P. GRAIN, FEED, I Q. COAL/COKE R. MEAT	ES CONT. JIPMENT	T. U.S. MA U. CHEMIC V. COMMC W. REFRIC X. BEVER	CALS ODITIES DR' GERATED FO AGES PRODUCTS	Y BULK		
HAZARDOUS M	IATERIAI	I S CARRII	FD/SHIPI	PFD (Please Circl	e All that Annly	T-IN CARO	GO TANKS	P-IN PACKAGE	FS	
C S A. DIVISIO C S B. DIVISIO C S C. DIVISIO C S D. DIVISIO C S E. DIVISIO C S F. DIVISIO	ON 1.1 ON 1.2 ON 1.3 ON 1.4 ON 1.5	T P T P T P T P T P T P	C S I C S I C S I C S I C S I	J. CLASS 3 K. DIVISION 4.1 L. DIVISION 4.2 M. DIVISION 4.3 N. DIVISION 5.1 D. DIVISION 5.2	T P T P T P T P T P T P T P T P	C S C S C S C S	T. CLASS 7 U. CLASS 8 V. CLASS 9 W. P.I.H. X. COMBU	(No Placards	T T T T	P P P
C S G. DIVISIO		T P		P. DIVISION 6.1 (L				OOUS WASTE		P
C S H. DIVISIO		T P T P		Q. DIVISION 6.1 (S R. DIVISION 6.2	Solid) T P T P		AA. ORM-D BB. ELEVA) ATED TEMP. M <i>A</i>		P P
<u> </u>		T 1	C S S	S. CLASS 7 (Placar	1	C S		E POLLUTANT	TS T	P
EQUIPMENT	Straight Trucks	Truck Tractors	Trailers	HazMat Cargo Tank Trailers	HazMat Cargo Tank Trucks	MotorCoach		ENGERS Mini-bus/Van I	Limousine	
OWNED										
TERM LEASED										
TRIP LEASED										
DRIVERS SUBJE	CT TO FM	ICSR: I	NTERSTA	ATE	INTRASTAT	TE .	-1			
	100-Mile	Radius		100-	-Mile Radius		_ TOTAL	DRIVERS		
	Beyond 1	00-Mile Rad	lius	Bev	ond 100-Mile Rad	lius	TOTAI	. CDL DRIVERS	S	

Jurisdiction	1	ET A	Section 6			IRP			
Jurisaicaon	Operates	FTA Bulk Storage	# of Vehicles	SSRS St Fee	Total St Fee	Mileage Last Calenda			
	Operates	Duik Storage	# of venicles	Stree	Total St Fee	Actual	Estimate	State	
Alabama				\$ 6.00		rictual	Listinate	AL	
Alaska								KA	
Arizona								AZ	
Arkansas				\$ 5.00				AR	
California				\$ 5.00				CA	
Colorado				\$ 5.00				CO	
Connecticut				\$10.00				CT	
Delaware D.C.								DE DC	
Florida								FL	
Georgia				\$ 5.00				GA	
Idaho				\$ 2.00				ID	
Illinois				\$ 7.00				IL.	
Indiana				\$10.00				IN	
Iowa				\$ 1.00				IA	
Kansas				\$10.00				KS	
Kentucky				\$10.00				KY	
Louisiana				\$10.00				LA	
Maine				\$ 8.00				ME	
Maryland				#10.00				MD	
Massachusetts				\$10.00				MA	
Michigan Minnesota				\$10.00 \$ 5.45				MI MN	
Mississippi				\$ 5.45				MS	
Missouri				\$10.00				MO	
Montana				\$ 5.00				MT	
Nebraska				\$ 3.50			<u> </u>	NE	
Nevada				7 010 0				NV	
New Hampshire				\$10.00				NH	
New Jersey								NJ	
New Mexico				\$10.00				NM	
New York				\$10.00				NY	
North Carolina				\$ 1.00				NC	
North Dakota				\$10.00				ND	
Ohio			1	\$ 5.00				OH	
Oklahoma				\$ 7.00				OK OR	
Oregon Pennsylvania								PA	
Rhode Island				\$ 8.00				RI	
South Carolina				\$ 5.00				SC	
South Dakota				\$ 5.00			<u> </u>	SD	
Tennessee				\$ 8.00				TN	
Texas				\$ 2.00				TX	
Utah				\$ 6.00				UT	
Vermont								VT	
Virginia				\$10.00				VA	
Washington				\$10.00				WA	
West Virginia				\$ 3.00				WV	
Wyoming				\$ 5.00				WI	
Wyoming								WY	
Alberta								AB	
Brit Columbia								BC	
Manitoba								MD	
New Brunswick								NB	
New Foundland								NF	
Nova Scotia								NS	
Ontario								ON	
Pr Edward Island								PE	
Quebec								PQ	
Saskatchewan								SK	
NW Territory								NT	
Yukon								YT	
Total				Page 3					

For-Hire Carriers Only

Note: Kentucky requires the payment of \$10.00 for each vehicle operating as a For-Hire carrier. You are required to pay only one set of fees; therefore, you will need to add the total number of vehicles being operated as For-Hire, both in-state and out-of-state, and remit ten (\$10.00) dollars for each of those vehicles. If you are ICC Authorized and paid Kentucky's fees through the Single State Registration System please attach a copy of your RS-3 form. There are no fees for IFTA, KIT and KYU number. **Please make all checks and/or money orders to Kentucky State Treasurer.**

If you are a non-resident of Ken	tucky, please designate your Kentucky Proc	ess Agent's name and Address:	
-			
C: 1.	T:41	Data	
Signed:	Title:	Date:	
G			
Section 7 Other *Municipal Solid Waste	Transporters (Please complete attachment	CC 05 41 Application for Ventual	zu Colid Wosto Transporter
Vehicle Identification Car		.C 93-41-Application for Kentuck	ly solid waste Transporter
	s (Please complete attachment TC 95-278.)		
_	please list the types of hazardous materials		
All Carriers			
Section 8 Taxes			
	rs over 26,000 pounds and based in Kentuck	cy but operating in other states.)	
	to show jurisdictions of operation.		
	al sets requested (1 set per vehicle)	_ (There is no fee for decals)	
Type of fuel used in qualif		** ***	
	Gasoline Gasohol Natural Gas	Liquid Propane	
	ed as an IFTA Carrier? No Yes		
If yes: Name of Jurisdicti	r cancelled? No Yes License # _		
			lagring Vantualar
	(KIT) License (All carriers over 26,000 pousets requested (1 set per vehicle)		leaving Kentucky.)
	Cax (KYU) License (All carriers operating i		weight over 50 000
	ist of taxable vehicles TC 95-38).	i Kentucky with a declared gloss	weight over 39,999
pounds.) What complete the f	ist of taxable vehicles 1C 93-38).		
Section O Intermedianal Decistor	tion Dian		
Section 9 International Registrat	ion Fian		
IRP License (All carriers	s needing apportioned plates) Please comple	ete Schedule "A" (TC 95-303)	which lists all your vehicles
	for Kentucky and <i>Section 6</i> .	ne senedare 11 (10)3 303)	which has an your vehicles
to the appointment register	ior menusity and section of		
Section 10			
	by that the information given is, to the best of	f my knowledge, true, accurate, a	nd complete. In addition, I
	e any outstanding road tax obligations or su		
	rements as specified in the International Fu		
	I further agree that the Department of Vehic		
	urisdiction. I further certify that I am familian		
	ulations. Failure to comply with these prov		
authority in Kentucky or all memb		G	•
	of the owner and all partners is required. If	a corporation, an officer must sign	1.
Signed:	Title:	Date	
Signea:	Title:	Date	

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PH: (502) 564-4540 FAX: (502) 564-4138

APPLICATION FOR THE REGISTRATION OR DELETIONS OF VEHICLES IN KENTUCKY SUBJECT TO KENTUCKY WEIGHT DISTANCE (KYU) TAX

Please list and identify separately those power units to be deleted.

KYU#:				US DOT#:
Name:				Name of Person Completing Form (Please Print)
Address:				Dhonor
	City	State	Zip	Phone:

LIST POWER UNITS ONLY. DO NOT LIST TRAILERS.

	any Unit Number	Complete Vehicle Identification Number	Make of Vehicle	Year	Declared Gross
(Only 6 digits)		(Serial Number)			Weight
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
20.					

The above list should contain only vehicles 60,000 pounds and over, subject to weight distance.

Mail to: Division of Motor Carriers

P.O. Box 2007

Frankfort, Kentucky 40602